



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
ACTING DIRECTOR

October 26, 2023

Daniel Phillips  
Covenant Enabling Res of MI Inc.  
862 Forest Park Road  
Muskegon, MI 49441

RE: License #:	AS610089223 Mary's House 862 Forest Park Road Muskegon, MI 49441-4631
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Dear Mr. Phillips:

Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. The corrective action plan is due 15 days from the date of this letter and must include the following:

- How compliance with each rule will be achieved.
- Who is directly responsible for implementing the corrective action for each violation.
- Specific dates for each violation as to when the correction will be completed or implemented.
- How continuing compliance will be maintained once compliance is achieved.
- The signature of the licensee or licensee designee or home for the aged authorized representative and a date.

Upon receipt of an acceptable corrective plan, and verification that the corrections are completed, a regular license will be issued. If you fail to submit an acceptable corrective action plan, disciplinary action will result.

Please contact me with any questions. If I am not available and you need to speak to someone immediately, you may contact the local office at (616) 356-0100.

Sincerely,

A handwritten signature in black ink that reads "Elizabeth Elliott". The signature is written in a cursive style with a large, looping initial "E".

Elizabeth Elliott, Licensing Consultant  
Bureau of Community and Health Systems  
Unit 13, 7th Floor  
350 Ottawa, N.W.  
Grand Rapids, MI 49503  
(616) 901-0585

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
BUREAU OF COMMUNITY AND HEALTH SYSTEMS  
RENEWAL INSPECTION REPORT**

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AS610089223
<b>Licensee Name:</b>	Covenant Enabling Res of MI Inc.
<b>Licensee Address:</b>	862 Forest Park Road Muskegon, MI 49441
<b>Licensee Telephone #:</b>	(616) 550-1643
<b>Licensee/Licensee Designee:</b>	Daniel Phillips, Designee
<b>Administrator:</b>	Daniel Phillips, Administrator
<b>Name of Facility:</b>	Mary's House
<b>Facility Address:</b>	862 Forest Park Road Muskegon, MI 49441-4631
<b>Facility Telephone #:</b>	(231) 780-9144
<b>Original Issuance Date:</b>	05/31/2001
<b>Capacity:</b>	6
<b>Program Type:</b>	DEVELOPMENTALLY DISABLED MENTALLY ILL

**II. METHODS OF INSPECTION**

Date of On-site Inspection(s): 10/24/2023

Date of Bureau of Fire Services Inspection if applicable: N/A

Date of Health Authority Inspection if applicable: N/A

No. of staff interviewed and/or observed 1  
No. of residents interviewed and/or observed 2  
No. of others interviewed 0 Role: [REDACTED]

- Medication pass / simulated pass observed? Yes  No  If no, explain.  
At the time of the inspection, resident medications were not being administered.
- Medication(s) and medication record(s) reviewed? Yes  No  If no, explain.
- Resident funds and associated documents reviewed for at least one resident?  
Yes  No  If no, explain.
- Meal preparation / service observed? Yes  No  If no, explain.
- Fire drills reviewed? Yes  No  If no, explain.
- Fire safety equipment and practices observed? Yes  No  If no, explain.
- E-scores reviewed? (Special Certification Only) Yes  No  N/A   
If no, explain.
- Water temperatures checked? Yes  No  If no, explain.
- Incident report follow-up? Yes  No  If no, explain.
- Corrective action plan compliance verified? Yes  CAP date/s and rule/s:  
205(5), 205(6), 301(4), 301(8), 315(3), 318(5), 507(5). N/A
- Number of excluded employees followed-up? N/A
- Variances? Yes  (please explain) No  N/A

**III. DESCRIPTION OF FINDINGS & CONCLUSIONS**

This facility was found to be in non-compliance with the following rules:

<b>R 330.1803</b>	<b>Facility environment; fire safety.</b>
	<p>(5) The capability of the clients to evacuate a facility in the event of a fire shall be assessed using methods described in appendix f of the 1985 life safety code of the national fire protection association. Appendix f of the 1985 life safety code of the national fire protection association is adopted by reference as part of these rules. A copy of the adopted appendix f is available from the Department of Mental Health, Lewis Cass Building, Lansing, MI 48913, at cost. A copy of appendix f may also be obtained from the National Fire Protection Association Library, Battermarch Park, P.O. Box 9101, Quincy, Massachusetts 02269-9101, 1-800-344-3555. A prepaid fee may be required by the national fire protection association for a copy of appendix f. A price quote for copying of these pages may be obtained from the national fire protection association.</p>
<p><b>Finding:</b> The E scores for the residents of the facility need to be updated.</p> <p><b>Conclusion:</b> Home manager, Amber Turner Sneed stated she is new and will complete this with home manager Jackie Stoltzfus as soon as possible.</p>	
<b>R 400.14205</b>	<b>Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.</b>
	<p>(5) A licensee shall obtain written evidence, which shall be available for department review, that each direct care staff, other employees, and members of the household have been tested for communicable tuberculosis and that if the disease is present, appropriate precautions shall be taken as required by state law. Current testing shall be obtained before an individual's employment, assumption of duties, or occupancy in the home. The results of subsequent testing shall be verified every 3 years thereafter or more frequently if necessary.</p>

<p><b>Finding:</b> Staff BL needs a TB test with results in employee file for department review.</p> <p><b>*Repeat violation from 10/13/2021 renewal inspection. Different staff.</b></p> <p><b>Conclusion:</b> Ms. Sneed stated she will get this completed immediately.</p>	
<b>R 400.14208</b>	<b>Direct care staff and employee records.</b>
	(1) A licensee shall maintain a record for each employee. The record shall contain all of the following employee information: (e) Verification of experience, education, and training.
<p><b>Finding:</b> Staff BL does not have verification of training in the employee file for department review.</p> <p><b>Conclusion:</b> Ms. Sneed stated she will include staff training in the file as soon as possible.</p>	
<b>R 400.14301</b>	<b>Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.</b>
	(10) At the time of the resident's admission to the home, a licensee shall require that the resident or the resident's designated representative provide a written health care appraisal that is completed within the 90-day period before the resident's admission to the home. A written health care appraisal shall be completed at least annually. If a written health care appraisal is not available at the time of an emergency admission, a licensee shall require that the appraisal be obtained not later than 30 days after admission. A department health care appraisal form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.

<p><b>Finding:</b> Resident EK &amp; BAG do not have a health care appraisal in the resident file.</p> <p><b>Conclusion:</b> Ms. Sneed stated she will get resident EK's health care appraisal in the file immediately.</p>	
<b>R 400.14301</b>	<p><b>Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.</b></p>
	<p>(4) At the time of admission, and at least annually, a written assessment plan shall be completed with the resident or the resident's designated representative, the responsible agency, if applicable, and the licensee. A licensee shall maintain a copy of the resident's written assessment plan on file in the home.</p>
<p><b>Finding:</b> *Resident EK's assessment plan is not signed by all interested parties.</p> <p>Resident EK and BAG's assessment plans do not have all the required information marked on the plan such as special diets &amp; physical limitations.</p> <p><b>*Repeat violation from 10/13/2021 renewal inspection.</b></p> <p><b>Conclusion:</b> Ms. Sneed will review resident assessment plans and make sure they are filled out and signed.</p>	
<b>R 400.14301</b>	<p><b>Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.</b></p>
	<p>(8) A copy of the signed resident care agreement shall be provided to the resident, or the residents designated representative and responsible agency, if applicable, at least annually or more often if necessary.</p>

<p><b>Finding:</b> Resident EK's resident care agreement is not signed by all interested parties.</p> <p><b>*Repeat violation from 10/13/2021 renewal inspection.</b></p> <p><b>Conclusion:</b> Ms. Sneed will get resident EK's resident care agreement signed by all interested parties.</p>	
<b>R 400.14303</b>	<b>Resident care; licensee responsibilities.</b>
	<p>(5) A licensee shall provide both of the following when specified in the resident's written assessment plan:</p> <p>(a) Direction and opportunity for the growth and development of a resident as achieved through activities that foster independent and age-appropriate functioning, such as dressing, grooming, manners, shopping, cooking, money management, and the use of public transportation.</p>
<p><b>Finding:</b> Ms. Sneed stated residents cook breakfast and lunch for themselves with staff supervision, but it was not documented in the resident assessment plans.</p> <p><b>Conclusion:</b> Ms. Sneed will review resident assessment plans with the residents supports coordinators and designated representatives and document on the assessment plans what duties each resident can do with staff supervision.</p>	
<b>R 400.14312</b>	<b>Resident medications.</b>
	<p>(1) Prescription medication, including dietary supplements, or individual special medical procedures shall be given, taken, or applied only as prescribed by a licensed physician or dentist. Prescription medication shall be kept in the original pharmacy-supplied container, which shall be labeled for the specified resident in accordance with the requirements of Act No. 368 of the Public Acts of 1978, as amended, being {333.1101 et seq. of the Michigan Compiled Laws, kept with the equipment to administer it in a locked cabinet or drawer, and refrigerated if required.</p>



<p><b>Finding:</b> Resident EK's medication Terbinafine 250mg tab, Ramelteon 8mg tab, Loratadine 10mg tab, Temazepam 22.5mg capsule, Lurasidone HCL, 20mg tab, all to be administered at bedtime or in the evening were not signed as administered on 10/23/2023. This renewal was completed on 10/24/2023.</p> <p><b>Conclusion:</b> Ms. Sneed stated she will remind staff to sign the MAR (medication administration record) upon administering resident medications.</p>	
<b>R 400.14313</b>	<b>Resident nutrition.</b>
	(4) Menus of regular diets shall be written at least 1 week in advance and posted. Any change or substitution shall be noted and considered as part of the original menu.
<p><b>Finding:</b> The resident menus posted on the refrigerator in the kitchen do not show anything on the menu for breakfast or lunch. Ms. Sneed stated residents make their own breakfast and lunch. The dinners are documented on the menus.</p>	
<b>R 400.14315</b>	<b>Handling of resident funds and valuables.</b>
	(3) A licensee shall have a resident's funds and valuables transaction form completed and on file for each resident. A department form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.
<p><b>Finding:</b> The residents do not have Funds I &amp; Funds II documents in their resident files for department review.</p> <p><b>Conclusion:</b> Ms. Sneed acknowledged that the Resident Funds I&amp;II documents are not in resident files and that she does not do anything or handle any resident funds.</p>	
<b>R 400.14316</b>	<b>Resident records.</b>
	(1) A licensee shall complete, and maintain in the home, a separate record for each resident and shall provide record information as required by the department. A resident record shall include, at a minimum, all of the following information: <ul style="list-style-type: none"> <li>(a) Identifying information, including, at a minimum, all of the following: <ul style="list-style-type: none"> <li>(i) Name.</li> <li>(ii) Social security number, date of birth, case number, and marital status.</li> <li>(iii) Former address.</li> </ul> </li> </ul>

	<ul style="list-style-type: none"> <li>(iv) Name, address, and telephone number of the next of kin or the designated representative.</li> <li>(v) Name, address, and telephone number of the person and agency responsible for the resident's placement in the home.</li> <li>(vi) Name, address, and telephone number of the preferred physician and hospital.</li> <li>(vii) Medical insurance.</li> <li>(viii) Funeral provisions and preferences.</li> <li>(ix) Resident's religious preference information.</li> <li>(b) Date of admission.</li> <li>(c) Date of discharge and the place to which the resident was discharged.</li> <li>(d) Health care information, including all of the following: <ul style="list-style-type: none"> <li>(i) Health care appraisals.</li> <li>(ii) Medication logs.</li> <li>(iii) Statements and instructions for supervising prescribed medication, including dietary supplements and individual special medical procedures.</li> <li>(iv) A record of physician contacts.</li> <li>(v) Instructions for emergency care and advanced medical directives.</li> </ul> </li> <li>(e) Resident care agreement.</li> <li>(f) Assessment plan.</li> <li>(g) Weight record.</li> <li>(h) Incident reports and accident records.</li> <li>(i) Resident funds and valuables record and resident refund agreement.</li> <li>(j) Resident grievances and complaints.</li> </ul>
<p><b>Finding:</b> Resident EK does not have a resident ID document in her file.</p>	
<p><b>R 400.14318</b></p>	<p><b>Emergency preparedness; evacuation plan; emergency transportation.</b></p>
	<p>(5) A licensee shall practice emergency and evacuation procedures during daytime, evening, and sleeping hours at least once per quarter. A record of the practices shall be maintained and be available for department review.</p>

<p><b>Finding:</b> After a review of the 2023 fire drills, there are no first quarter, January, February and March 2023, fire drills documented as completed.</p> <p><b>*Repeat violation from 10/13/2021 renewal inspection.</b></p> <p><b>Conclusion:</b> Ms. Sneed stated she was not working at the facility at that time and does not know if fire drills were conducted or not. Upon interviewing residents, they were able to tell me how they evacuate, where they meet outside after a drill is conducted and that they practice drills regularly.</p>	
<b>R 400.14403</b>	<b>Maintenance of premises.</b>
	(1) A home shall be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.
<p><b>Finding:</b> Bathrooms #1&amp; #2 need the ceiling fans cleaned.</p> <p>Bathroom #2 needs the light bulb replaced in the ceiling fan.</p> <p>The toilet paper holder on the wall in the ½ Bathroom in the lower-level resident activity room is broken off and in need of repair.</p> <p><b>Conclusion:</b> Ms. Sneed stated she will fix this immediately.</p>	
<b>R 400.14407</b>	<b>Bathrooms.</b>
	(2) Bathrooms shall have doors. Only positive-latching, non-locking-against-egress hardware may be used. Hooks and eyes, bolts, bars, and other similar devices shall not be used on bathroom doors.

<p><b>Finding:</b> All the bathroom doors have flip bolt locks on the outside of the doors. If a resident is in the bathroom and someone flipped the bolt locks from the bedroom side of the door, the resident inside the bathroom would not be able to exit the bathroom because it would be locked from the outside.</p> <p><b>Conclusion:</b> Ms. Sneed stated she does not know when the locks were placed on the outside of the doors, because they were there when she started the job, but she will have them all removed immediately.</p>	
<b>R 400.14410</b>	<b>Bedroom furnishings.</b>
	(1) The bedroom furnishings in each bedroom shall include all of the following: (d) At least 1 chair.
<p><b>Finding:</b> Resident room #3 did not have a chair in it.</p> <p><b>Conclusion:</b> Ms. Sneed will make sure there is a chair in the room even if it is a folding or a bag style chair in the closet.</p>	
<b>R 400.14507</b>	<b>Means of egress generally.</b>
	(5) A door that forms a part of a required means of egress shall be not less than 30 inches wide and shall be equipped with positive-latching, non-locking-against-egress hardware.
<p><b>Finding:</b> The door exiting the house is not non locking against egress and has a dead bolt on it.</p> <p>*The French doors in the basement have non locking against egress hardware on the door handles. These doors are part of a required means of egress from the lower-level resident activity area.</p> <p>*Repeat violation from renewal inspection dated 10/13/2021</p> <p><b>Conclusion:</b> Ms. Sneed stated she will let LD Daniel Phillips know the door locks needs to be changed.</p>	
<b>R 400.14507</b>	<b>Means of egress generally.</b>
	(6) Occupied room door hardware shall be equipped with positive-latching, non-locking-against-egress hardware.

**Finding:** The laundry room has a lock on it that is non locking against egress. The laundry room is used by residents.

**Conclusion:** Ms. Sneed explained that there are two doors in the laundry room, one exits to the attached apartment and the door is locked so the renter in the apartment does not enter the AFC through the laundry room. However, if residents are doing their laundry, which they are allowed to do on their own if able, they cannot exit the laundry room without unlocking the lock on the handle of the knob. Ms. Sneed will address the issue with the LD.

#### IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, and verification that the corrections documented in the report have been addressed, renewal of the license is recommended.



10/26/2023

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Licensing Consultant

Date